Name In Full — Certificate of Death

Franklin G Airey.

Died at Town: Cambridge — County: Dorchester — MARYLAND

Date 189 9 — Month: February — Day: 8 — Age: Y. 38 M. 10 D. 5 — Native of: Dorchester Co — Occupation: Fisherman

Male · White · Married · ~~Widow~~ · Divorced

~~Female~~ · ~~Colored~~ · ~~Single~~ · ~~Widower~~ · Number of children living 4

Husband / Wife of Mary S. Airey

Father's Name Andrew Airey — Mother's Name Elizabeth Airey

Cause of Death — Primary: Typhoid Fever — 1 — How long sick: 8 weeks

Immediate: Abscess of Liver — Accident, Suicide, Homicide

Reported by W W Goldsborough

Address Cambridge Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 63968

Name in Full | Certificate of Death

Margaret Peery Alexander

Died at Town: Holland's Island, County: Worchester MARYLAND

Date 1899 Month: Feb. Day: 6 | Age Y. 4 M. 4 D. 3 | Native of: Md. | Occupation: —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

Father's Name: H.G. Alexander, M.D. Mother's Name: Nancy H. Alexander

Cause of Death: Primary: Cerebral Meningitis — How long sick: 4 1/2 days

Immediate: Heart failure — ~~Accident, Suicide, Homicide~~

Reported by: H.G. Alexander M.D. 399

Address: Holland's Isl'd. Maryland —

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79708

Attended by Dr. H.G. Alexander
of Holland's Isl'd. Md.

Information contained in this certificate re-
ceived from H.G. Alexander M.D.
of Holland's Island

Seen by Coroner
of

OVER

Name In Full Mrs. Isadore Cox

Certificate of Death

Died at Town Lloyds County Dorchester MARYLAND

Date 1899 Month 3 Day 21 | Age Y. M. D. | Native of | Occupation

~~Male~~ White Married Widow Divorced

Female Colored ~~Single~~ Widower Number of children living

Husband of Wife

Father's Name H. Columbus Hicks Mother's Name

Cause of Death Primary 161 How long sick

Immediate Accident, Suicide, Homicide

Reported by Dorchester Standard 2-25

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79[illegible]

Christ P. E. Church.

Rev. F. C. Page

Cambridge Cemetery.

Name In Full G. E. Cusic

Certificate of Death

Died at Town Leaksville County Ser MARYLAND

Date 189 9 Month 2 Day 17 | Age Y. 2 M. 6 D. 11 | Native of | Occupation

Male ~~Female~~ White ~~Colored~~ Married Single Widow Widower Divorced Number of children living

Husband of Wife W. J. Cusic

Father's Name

Mother's Name Hellen J. Cusic

Cause of Death: Primary 161 | How long sick 6

Immediate | Accident, Suicide, Homicide

Reported by A. J. Kirwan

Address Crapo

Must be signed by physician, if any in attendance, otherwise coroner, undertaker or minister.

LIBRARY BUREAU, 79[illegible]

Name In Full

Certificate of Death

Little Ben Daneker

Town

County

Dorchester

Died at

MARYLAND

Date 1899	Month 2	Day 27	Age Y. 8	M.	D.	Native of	Occupation

Male ~~Female~~ White Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of Wife

Father's Name Marion Daneker

Mother's Name

Cause of Death: Primary Difilitheria 8a

Immediate

How long sick

Accident, Suicide, Homicide

Reported by Dorchester Standard 3-4

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full | Certificate of Death

Adalaide Danniker

Died at Town Cambridge County Dorchester County MARYLAND

Date 189 9 Month 2 Day 22 Age Y. 3 M. 10 D. 8 Native of Md Occupation —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ Widower ~~Number of children living~~

Husband of Wife

Father's Name Julius Danniker Mother's Name Minnie Danniker

Cause of Death Primary Diphtheria Fa How long sick 3 days

Immediate Accident, Suicide, Homicide

Reported by Dr. John Mace

Address Cambridge Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full

Louisa Hensen

Certificate of Death

Died at Town: Castle Haven County: Dorchester MARYLAND

Date 1899 Month: Feb Day: 11 | Age Y.: 40 M.: D.: | Native of: U S | Occupation: Housewife

~~Male~~ ~~White~~ Married ~~Widow~~ ~~Divorced~~

Female Colored ~~Single~~ Widower Number of children living 0

~~Husband~~ Wife of Alfred Hensen

Father's Name: Eli Cephas Sr Mother's Name: Elizabeth Cephas

Cause of Death — Primary: Uterine Fibroids III How long sick: 2 weeks

Immediate: Diarrhoea

~~Accident, Suicide, Homicide~~

Reported by J A Stokes M D.

Address Cornersville

Must be signed by physician, if any In attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55665

Name In Full William L. Hopkins — Certificate of Death

Died at Town Cambridge County Dorchester — MARYLAND

Date 1899 Month 2 Day 7 | Age Y. 71 M. D. | Native of | Occupation

~~Male~~ ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ ~~Divorced~~ | Number of children living 1

~~Wife~~ Husband of Ottillie L. Mullikin

Father's Name Josiah Hopkins | Mother's Name

Cause of Death — Primary: Cerebro Spinal Meningitis — How long sick 3 days.

Immediate: 39 — Accident, Suicide, Homicide

Reported by Cambridge Free Press

Address 2-10

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70938

Dr. B. A. Goldsborough.
Dr. Thayer of Balto. was consulting Phy.
Grace M. E. Church
Rev. K. M. Maxey assisted by
Rev E. C. Macfinchol, Zion M. E. Church.
Cambridge Cemetery.

Name in Full | Certificate of Death

Herman Sermoyne Jenkins

Died at Town: Cambridge County: Dorchester MARYLAND

Date 1899 Month: Feby Day: 15 Age Y.: — M.: 2 D.: 28 Native of: Dorchester Occupation: ——

Male ~~Female~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored ~~Single~~ ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name: Andrew Jones

Mother's Name: Lizzie Jenkins

Cause of Death: Primary: Marasmus 82 How long sick: From birth

Immediate: Exhaustion ~~Accident, Suicide, Homicide~~

Reported by: Guy Steele M. D.

Address: Cambridge Dorchester Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Elizabeth Lowe. Certificate of Death

Died ~~at~~ in Town County Dorchester MARYLAND

Date 1899 Month Day February 14 Age Y. M. D. 54. Native of Dorchester Co. Occupation Housewife

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ Widower Number of children living 4

Husband ~~Wife~~ of Isaac W Lowe -

Father's Name — Mother's Name —

Cause of Death Primary Pneumonia 72 How long sick 10 days.

Immediate Exhaustion ~~Accident, Suicide, Homicide~~

Reported by J W Goldsborough. MD

Address Cambridge Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79708

Name in Full

Emily Ann Marshall

Certificate of Death

Died at Town Cambridge County Dorchester MARYLAND

Date 1899 Month July Day 15 Age Y. 65 M. about D. Native of Md Occupation ——

~~Male~~ White ~~Married~~ Widow ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 5

Husband / Wife of 6

Father's Name

Mother's Name

Cause of Death: Primary Heart disease 57 How long sick 15 minutes

Immediate See other side

Accident, Suicide, Homicide

Reported by Guy Steele M.D.

Address Cambridge Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU: 65968

character of heart-lesion not known
no autopsy was performed. Patient
complained of shortness of breath, died
in fifteen minutes, before Dr could reach
her.

Name in Full

Certificate of Death

Benj Mills.

Died at Town Rossies Neck County Dor. MARYLAND

Date 189 9 Month Feb Day 14 Aga Y. 65 M. D. Native of U.S. Occupation Oysterman

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ Divorced

Number of children living 4 +

Husband ~~Wife~~ of Louisa Mills

Father's Name

Mother's Name 22f

Cause of Death { Primary Tuberculosis of kne + lungs How long sick 6 mos.

Immediate " of intestines ~~Accident, Suicide, Homicide~~

Reported by S A Stokes M.D.

Address Crisfield Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 6506R

Name in Full Ruth Wolock

Certificate of Death

Died at Town near Eureys County Dorchester MARYLAND

Date 1892 Month 2 Day 3 Age Y. 11 M. D. Native of Occupation

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children~~ living

Husband of Wife

Father's Name Mother's Name 1456

Cause of Death Primary Killed by lightning How long sick

Immediate Accident, Suicide, Homicide

Reported by Dorchester Standard 2-11

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full

Certificate of Death

Margaret E. Phillips

Died at Town Cambridge County Dorchester MARYLAND

Date 1899 Month Feby Day 21 | Age Y. 66 M. — D. | Native of Dorchester Co. | Occupation Housewife

~~Male~~ White Married Widow ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 4

Husband / Wife of Jno E Phillips.

Father's Name — Messick

Mother's Name Susan Messick

Cause of Death: Primary Phthisis Pulmonalis — How long sick 5 weeks

Immediate Exhaustion 22a — ~~Accident, Suicide, Homicide~~

Reported by B W Solesbrough

Address Cambridge Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Chas Ricketts

Died at Town Hinchville County Dorchester MARYLAND

Date 1899 Month Feb Day 8 | Age Y. 40 M. D. | Native of md | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | Married ~~Widow~~ ~~Divorced~~

~~Female~~ | ~~Colored~~ | Single ~~Widower~~ ~~Number of children living~~

Husband of

Wife

Father's Name

Mother's Name Tear Ann Ricketts

Cause of Death { Primary La Grippe 9 | How long sick 10 days

Immediate Pneumonia | ~~Accident, Suicide, Homicide~~

Reported by R Kemp Jefferson

Address Federalsburg Caroline Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. F6068

Name in Full: Lillian Sherman

Certificate of Death

Died at: Town: Airey County: Dorchester MARYLAND

Date 1899 Month: 2 Day: 14 | Age Y. 19 M. D. | Native of: Md | Occupation: House Wife

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | Widow Widower | Divorced Number of children living

~~Husband~~ Wife of: Jas. Sherman Jr.

Father's Name: Fred. Windsor | Mother's Name:

Cause of Death: ~~Primary~~ | Immediate: Post Parturn Hemorrage | How long sick | ~~Accident, Suicide~~, Homicide

Reported by: A. Sayers M. D.

Address: Salem Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full: Grace Stanley

Certificate of Death

Died at — Town: Cambridge — County: Dorchester — MARYLAND

Date 1899 — Month: Feby — Day: 21 — Age: Y. 25 M. about D. — Native of: Dorchester Co — Occupation: Housework

~~Male~~ ~~Wife~~ Married ~~Widow~~ ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living: None

Husband / Wife of: Geo. Stanley

Father's Name: Danl. Lee — Mother's Name: Maria Nichols

Cause of Death — Primary: Pulmonary phthisis — How long sick: 4 months

Immediate: Gradual exhaustion — 22a — ~~Accident, Suicide, Homicide~~

Reported by: Guy Steele M.D.

Address: Cambridge Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Elihu Wheatley — Certificate of Death

Died at East New Market (Town) Dorchester (County) MARYLAND

Date 1899 Month 2 Day 1 | Age Y. 78 M. — D. — | Native of md | Occupation Farmer

Male / ~~Female~~ | White / ~~Colored~~ | ~~Married~~ / ~~Single~~ / Widower / ~~Divorced~~

Husband / Wife of —

Number of children living 7

Father's Name Could not learn — Mother's Name Could not learn —

Cause of Death: Primary old age - 141 — How long sick 3 weeks

Immediate inflamation of the bladder — ~~Accident, Suicide, Homicide~~

Reported by Geo P. Jones

Address East New Mkt Dor. Co. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65988

Name In Full Robert Willey

Certificate of Death

Died at Town Lakeville County Dor MARYLAND

Date 1899 Month Feb Dey 2 | Age Y. 4 M. 10 D. 5 | Native of Dor | Occupation

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husbend of Wife

Father's Name William H Willey

Mother's Name Anna Willey

Cause of Death ~~Primary~~ 49

Immediate Spasm

How long sick 6 days

Accident, Suicide, Homicide

Reported by A. J. [illegible]

Address Crapo

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. James A Conway

of Bishops Head

seen by Coroner

of

information contained in this certificate re-

ceived from

of

Name In Full Manilla Woodland

Certificate of Death

Died at Town Bishops Head County Dor MARYLAND

Date 1899 Month 2 Day 19 Age Y. M. D. 10 Native of Dor Occupation

Male White Married Widow Divorced

Female Colored Single Widower Number of children living

Husband of Wife

Father's Name Harrison Woodland Mother's Name Angie Woodland

Cause of Death Primary 161 How long sick 6 days

Immediate Accident, Suicide, Homicide

Reported by A. J. Kirna

Address Crapo

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898